CJA 24 AUTHORIZATION AND VOUCHER FOR PAYMENT OF TRANSCRIPT

1. CIR/DIST/DIV. CODE COUNTY OF COUN				VOUCHER NUMBER			
3, MAG. DKT/DEF. NUMBER		4. DIST. DKT.	DKT/DEF. NUMBER 5. APPEALS DKT/D 1:05-000005-003		DEF. NUMBER	6. OTHER DKT. NUMBER	
7. IN CASE/MATTER OF (Case Name)		8. PAYMENT		9. TYPE PERSON F	EPRESENTED	10. REPRESENTATION TYPE (See Instructions)	
U.S. v. KIM			Appel		nt	Appeal of Other Matters	
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense.							
		—————————————————————————————————————	24 23 1 \	(In the content of the season	Add A to go a so to		
12. PROCEEDING IN	WHICH TRA	NSCRIPT IS TO B					
							RT OF GUAM
13. PROCEEDING TO statement, prosecution	BE TRANSC! argument, defen	RIBED (Describe sp	ecifically). NOTE: The ion rebuttal, voir dire o	e trial transcripts are not to r jury instructions, unless s	include prosecution opening pecifically authorized by the	statement, defense of	2008
					* *	S.E. S. J.	W0544
14. SPECIAL AUTHORIZATIONS (Services Other Than Ordinary)						AKY L.M.	Judge's Initials
A. Apportioned Cost % of transcript with (Give case name and defenda				dant)	CI	.ekh ur	COURT
			☐ Real Time Un				
C. Prosecution Opening Statement Prosecution Argument Prosecution Rebuttal							
D In this multi-defen		Defense A		Voir Dire pede the delivery of acce	☐ Jury Instruction		
to persons proceed	ling under the (Criminal Justice Act.					
15. ATTORNEY'S STATEMENT As the attorney for the person represented who is named above, I hereby affirm that				16. COURT ORDER Financial eligibility of the person represented having been established to the court's satisfaction, the authorization requested in Item 15 is hereby granted.			
the transcript requested is necessary for adequate representation. 1, therefore, request authorization to obtain the transcript services at the expense of the United States pursuant to the Criminal Justice Act.							
Signature of Attorney			Date	Signature o	of Presiding Judicial Officer o	By Order of the Court	
Signature of Attorney							
Printed Name				Date of Order Nunc Pro Tunc Date			
Telephone Number: Panel Attorney Retained Atty							
Tallet Automey - Relatines Auty		Eega) Organization	tera of transition		a Karana a kanana		
17. COURT REPORTER/TR ☐ Official ☐ Cor	STATUS Transcriber	Other	18. PAYEE'S NAME (First Name, M.I., Last Name, including any suffix,) AND MAILING ADDRESS				
19. SOCIAL SECURITY NU				1			
					Talask	one Number:	
An TRANSCOURT		Y13-	No. of Pages	Rate Per Page	Sub-Total	Less Amount	Total
20. TRANSCRIPT		Include Page Numbers	No. of Fages	Kate Fer Fage	Sub-Total	Apportioned	
Original			<u> </u>				
Сору		<u></u>		<u> </u>		<u> </u>	
Expenses (itemize):					TOTAL AMOUNT CL	AIMED.	
					TOTAL AMOUNT CL	AIMED.	
21. CLAIMANT'S CERTIFI 1 hereby certify that the above other source for these services.	claim is for servic	SERVICE PROVID	ot, and that I have not sou	ght or received payment (comp	ensation or anything of value)	from any	
Signature of Claimant/Payee:				Date:			•
			કું કે ઉંટલે અને કું કું કરો છે.				
22. CERTIFICATION OF A	TTORNEY O	R CLERK I hereb	y certify that the ser	vices were rendered and	that the transcript was	received.	
Signature of Attorney or	Clerk		_ 	Date			
Signature of Attorney of	~1016						
23. APPROVED FOR PAYM	MENT			ago e mai ng <u>a</u> maay gabab	and the second s		24. AMOUNT APPROVED

Signature of Judicial Officer or Clerk